Attorney's Docket Number: COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY 6599.200-US (Includes Reference to PCT International Applications) As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: **Novel Glucagon Antagonists** The specification of which (check only one item below): is attached hereto [] [X] was filed as United States application Application No. To Be Assigned December 15, 2003 and was amended [] was filed as PCT international application Number on and was amended under PCT Article 19 I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by an amendment referred to above. I acknowledge the duty to disclose information which is material to patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56. I hereby claim priority benefits under Title 35, United States Code, §119 of any provisional or foreign application(s) for patent or inventor's certificate or of any PCT international applications(s) for patent or inventor's certificate or of any PCT international applications(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR U.S. PROVISIONAL/FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (if PCT, indicated "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 USC 119	
Denmark	PA 2002 01967	20 December 2002	[X]YES	[] NO
U.S.	60/438,131	06 January 2003	[X]YES	[] NO
			[]YES	[] NO
			[] YES	[] NO
			[]YES	[] NO

COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Includes Reference to PCT International Applications)

Attorney's Docket Number:

6599.200-US

I hereby claim the benefit under Title 35, United States Code '120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this applications is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, '112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, '1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120: U.S. APPLICATIONS STATUS (Check one) U.S. APPLICATION NUMBER U.S. FILING DATE Patented Pending Abandoned PCT APPLICATIONS DESIGNATING THE U.S. APPLICATION NO. FILING DATE US SERIAL NUMBERS ASSIGNED (if any) POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Reza Green, Reg. No. 38,475; Richard W. Bork, Reg. No. 36,459; Marc A. Began, Reg. No. 48,829; R. Wilk-Orescan, Reg. No. 45,220; Len S. Smith, Reg. No. 43,139 Send Correspondence to: Reza Green, Esq. Direct Telephone Calls To: Novo Nordisk Pharmaceuticals, Inc. Reza Green 100 College Road West (609) 987-5800 Princeton, NJ 0840 Family Name First Given Name Second Given Name Full Name of Inventor Kodra Janos Tibor Residence & City State or Foreign Country Country of Citizenship Citizenship Copenhagen Denmark Denmark Post Office Post Office Address State & Zip Code/Country Address Rvesgade 111B, IV DK-2100 Copenhagen O Denmark 2 Full Name of Family Name First Given Name Second Given Name Inventor **Behrens** Carsten Residence & State or Foreign Country Country of Citizenship Citizenship Kobenhavn Denmark Denmark Post Office Post Office Address City State & Zip Code/Country Address Lundtoftegade 107, 1 th DK-2200 Kobenhavn N Denmark Full Name of Family Name First Given Name Second Given Name Inventor Madsen Peter Residence & City State or Foreign Country Country of Citizenship Citizenship Bagsvaerd Denmark Denmark Post Office Address Post Office State & Zip Code/Country Address Ulvebjerg 7 DK-2880 Bagsvaerd Denmark 4 Full Name of Family Name First Given Name Second Given Name Inventor Jorgensen Anker Steen Residence & State or Foreign Country Country of Citizenship Citizenship Kobenhavn Denmark Denmark Post Office Address Post Office State & Zip Code/Country Address

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Attorney's Docket Number: COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY (Includes Reference to PCT International Applications) 6599.200-US Family Name First Given Name Second Given Name Full Name of inventor Christensen Inger Thoger State or Foreign Country Country of Citizenship Residence & City Citizenship Lyngby Denmark Denmark Post Office Address Post Office City State & Zip Code/Country Address Kulsviertoften 52 DK-2800 Kgs. Lyngby Denmark Family Name First Given Name 6 Full Name of Second Given Name Inventor City State or Foreign Country Residence & Country of Citizenship Citizenship Post Office Address Post Office City State & Zip Code/Country Address Family Name First Given Name Second Given Name 7 Full Name of Inventor City State or Foreign Country Country of Citizenship Residence & Citizenship Post Office Address State & Zip Code/Country Post Office Address Family Name First Given Name Second Given Name 8 Full Name of Inventor City State or Foreign Country Country of Citizenship Residence & Citizenship Post Office Address State & Zip Code/Country Post Office Address Family Name First Given Name Second Given Name 9 Full Name of Inventor City State or Foreign Country Country of Citizenship Residence & Citizenship Post Office Address City State & Zip Code/Country Post Office Address

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Signature of Inventor 1	Signature of Inventor 2	Signature of Inventor 3
Date	Date	Date
Signature of Inventor 4	Signature of Inventor 5	Signature of Inventor 6
Date	Date	Date
Signature of Inventor 7	Signature of Inventor 8	Signature of Inventor 9
Date	Date	Date